



5-3-04

1646

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of: David A. Ferrick, *et al.*

Serial No.: 09/966,976

Filed: September 27, 2001

For: METHODS AND COMPOSITIONS FOR SCREENING FOR
MODULATORS OF IgE SYNTHESIS, SECRETION AND
SWITCH REARRANGEMENT

Attorney Docket No.: RGV-002CN (formerly A-66038-4RMS/JJD/DLR)

Group Art Unit: 1646

Examiner: Murphy, Joseph


**Mail Stop Non-Fee Amendment
Commissioner for Patents
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CERTIFICATION UNDER 37 CFR 1.10

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April 29, 2004
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By:



Lisa M. DiRocco, Esq.
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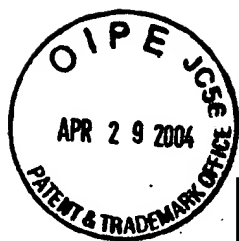
AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Sir:

This paper is in response to the Office Action dated January 29, 2004.

Amendments to the Claims begin on page 3 of this paper

Remarks begin on page 5 of this paper



PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/966976-Conf. #7248	
	Filing Date	September 27, 2001	
	First Named Inventor	David A. FERRICK	
	Art Unit	1646	
	Examiner Name	Murphy, Joseph	
Total Number of Pages in This Submission	1	Attorney Docket Number	RGV-002CN

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	LAHIVE & COCKFIELD, LLP Lisa M. DiRocco - 51,619
Signature	
Date	April 29, 2004

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Dated: April 29, 2004

Signature: (Lisa M. DiRocco)